

Department of Children and Family Services

SOLICITATION FOR THERAPEUTIC FOSTER CARE SERVICES

Questions and Answers

Question	Answer
<p>1. The <i>Solicitation for Therapeutic Foster Care Services</i> issued March 13, 2023, states, “DCFS is seeking proposals which combine efficacy of program with cost containment measures. Proposers shall provide a per diem cost for each youth to be served.” The <i>Solicitation</i> does not indicate that providers will be paid a common statewide per diem rate. Is it DCFS’s intention to negotiate rates by region, by provider, or some other individual contract basis?</p>	<p><b>It is not the intention of DCFS to negotiate rates by region, by provider or some other individual contract basis. Standard Therapeutic Foster Care per diem rates as set forth by DCFS at time of contract will be paid to all providers.</b></p>
<p>2. Will DCFS stipulate the minimum amount the provider’s contracted foster caregivers will receive per diem? Will DCFS designate a standard difference between Level 1 and Level 2?</p>	<p><b>DCFS will stipulate the minimum amount the provider’s contracted foster caregivers will receive per diem. DCFS will designate a standard difference between Level 1 and Level 2.</b></p>
<p>3. Will DCFS account for cost of living inflation since Louisiana’s TFC per diem rates were last adjusted?</p>	<p><b>DCFS continually assesses the possibility of per diem rate adjustments at fair market rates.</b></p>
<p>4. This solicitation clearly lays out the expectations DCFS has of TFC providers but makes no assurances that DCFS staff will maintain standard practices and provide requisite child welfare services to allow the provider to perform according to the contract. When DCFS is unable to participate in case management procedures when needed, will DCFS grant TFC providers the latitude to pursue the child’s best interest without risk of contractual consequences?</p>	<p><b>This question is premature and cannot be answered because it involves the anticipatory breach of a duty by DCFS. Such presupposition would be improper. DCFS cannot agree that it will fail to fulfill its duty, then delegate that duty to a contractor.</b></p>

<p>5. What is the formal mechanism by which a TFC provider can report to DCFS regarding the agency's failure to perform adequately in the care of children?</p>	<p><b>TFC providers with concerns of DCFS services provided to children in DCFS custody should be directed to DCFS State Office Home Development unless the concern warrants a report to the child abuse hotline.</b></p>
<p>About Emergency Placement Homes the <i>Solicitation for Therapeutic Foster Care Services</i> states:</p> <p><i>K. TFC Providers will make available 2 homes that accept emergency placements. At the onset of the contract, one emergency home shall be available to provide services as defined below. Within six months of execution of the contract, a second emergency home shall be available as defined below.</i></p> <p>The use of Emergency Placement Homes established solely for emergency placements is a process that seems likely to create one additional and perhaps unnecessary placement if a provider can otherwise maintain sufficient non-emergency homes in a region. Nearly every placement into TFC is an emergency. When possible, will DCFS allow a provider to convert an EPH placement into the child's more permanent TFC home to avoid moving a child unnecessarily?</p>	<p><b>EPH's are intended for emergency placement/short-term only (not to exceed 30 days) and not for permanent placements. The provider and the TFC foster caregiver determine the type of placement services the caregiver will provide. A TFC foster home should serve either as an EPH or a standard TFC foster home. Should the EPH foster caregiver wish to provide a more permanent placement for a child or youth, this could possibly be considered if the provider has at least 2 other EPH homes available for emergency placements.</b></p>
<p>6. Every placement disruption creates another risk of breaking attachment ability, another school disruption, and another broken trust. Does DCFS posit that EPHs are the preferred approach or a last resort to securing a TFC placement for a child?</p>	<p><b>The EPH home should be considered for placement if there are no other more permanent TFC placements available or if only a very short term placement (less than 30 days) is needed.</b></p>

<p>7. Also, regarding the period of EPH – if at the end of the no more than 30-day emergency placement a “permanent placement” is still unavailable, does DCFS intend that the child shall continue beyond 30 days in the original Emergency Placement Home or will DCFS require discharge from the EPH?</p>	<p><b>The intent is for the emergency placement not to exceed 30 days and will be carefully monitored by DCFS State Office Home Development. Placement beyond 30 days will only be considered in rare circumstances and must be approved by DCFS State Office Home Development in conjunction with the TFC provider of the EPH.</b></p>
<p>8. Regarding Emergency Placement Homes, the Solicitation states, “Within 30 days of placing a child or youth in an EPH, a more permanent placement shall be located ...” Specifically, what party is responsible for locating a more permanent placement before the end of the 30-day emergency placement?</p>	<p><b>DCFS is responsible for working with providers to locate a more permanent placement for the child or youth.</b></p>
<p>9. TFC providers often have opportunities to refer potential Regular Foster Caregivers to DCFS. Many who wish to open their homes are more suited for regular foster care due to the requirements and expectations of Therapeutic Foster Care. Will DCFS appoint a single point of contact to receive referrals from TFC providers? Will DCFS also track the referrals received from providers and report their disposition to the provider?</p>	<p><b>Potential families should be referred to the regional DCFS Home Development Unit that serves the family’s parish of residence. DCFS may consider a single point of contact to receive referrals from TFC providers. DCFS cannot specifically provide dispositions of individual referrals but may consider developing a tracking system to share overall outcomes of referrals from TFC providers.</b></p>
<p>10. Providers frequently accept children in emergency situations, but these children are not necessarily identified as requiring an emergency placement into a designated Emergency Placement Home.</p> <p>Emergency placements are made without designation. What standard procedure will DCFS implement for referring children to a provider's Emergency Placement Homes? Also, what official term or identifier will DCFS use to alert a provider that DCFS is specifically seeking an Emergency Placement Home for a particular child, so the provider will know to limit the child’s EPH placement to no more than 30 days?</p>	<p><b>The proposed standard procedure for EPH referral will require approval of State Office Home Development with referral requests to TFC providers identified as “EPH placement request.”</b></p>

<p>11. We received the Solicitation for Therapeutic Foster Care Services yesterday; we are considering adding this program to our QRTP. I did not see a rate already established in the proposal. Is there one, or do we propose a rate in the solicitation?</p>	<p><b>Contracts will specify rates. Current published Therapeutic Foster Care (TFC) rates (Family/administrative split) are: Level I \$ 86.50 (\$ 35.20 / \$ 51.30) Level 2 \$ 122.59 (\$ 59.93 / \$ 62.66). As per the Solicitation, Proposers are to provide a per diem cost per youth served.</b></p>
<p>12. Also, do we have to have the caregivers in the home already completely trained by the submission of the proposal or would we give a date for expected completion?</p>	<p><b>Proposers are not required to have caregivers in the home “completely trained” by the submission of the proposal. Contracts will specify start dates of services.</b></p>